



Policy Number:69615166602018

FLOOD POLICY DECLARATIONS

ASSURANT®

American Bankers Insurance Company of Florida
Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal

Policy Period: 05/13/2018 To 05/13/2019

Original New Business Effective Date: 05/13/2004

Reinstatement Date:

Form: RCBAP

For payment status, call: (800) 423-4403

These Declarations are effective

as of: 05/13/2018 at 12:01 AM

Producer Name and Mailing Address:
ATLANTIC SHIELD INSURANCE GROUP LLC
PO BOX 2496
MT PLEASANT, SC 29465-2496

Insured Name and Mailing Address:
BEE STREET CONDOS HPR INC
501 FOLLY RD
CHARLESTON, SC 29412-3001

NFIP Policy Number: 1961516660

Agent/Agency #: 70001-01939-000

Reference #:

Phone #: (843)856-2909

NAIC Number: 10111

Processed by:

Flood Service Center

P.O. Box 8695 Kalispell MT 59904-8695

Property Location:

20 BEE ST
CHARLESTON, SC 29403-5882

Building Description:

2-4 Family
Two Floors
Elevated Without Enclosure
Low Rise
Main House
Not Provided

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: AE Current Zone: AE

Community Number: 45 5412 0512 J

Community Name: CHARLESTON, CITY OF

Grandfathered: No

Pre-Fire Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: 0

Elevated Building: Y

No Addition(s) and Extension(s)

Replacement Cost: \$639,700

Number of Units: 4

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	639,700	1.430 / .090	1,250	38-	3,754.00	Premium Subtotal:	3,754.00
Contents:						Multiplier:	
Contents:						ICC Premium:	6.00
Location:						CRS Discount:	752.00
						Reserve Fund Assmt:	451.00
						HFIAA Surcharge:	250.00
						Federal Policy Fee:	150.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						Total Premium Paid:	3,859.00

Coverage Limitations May Apply. See Your Policy Form for Details.

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:



FLOOD POLICY DECLARATIONS

ASSURANT® American Bankers Insurance Company of Florida
Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal

Policy Period: 05/13/2018 To 05/13/2019

Original New Business Effective Date: 05/13/2004

Reinstatement Date:

Form: RCBAP

For payment status, call: (800) 423-4403

These Declarations are effective

as of: 05/13/2018 at 12:01 AM

Producer Name and Mailing Address:
ATLANTIC SHIELD INSURANCE GROUP LLC
PO BOX 2496
MT PLEASANT, SC 29465-2496

Insured Name and Mailing Address:
BEE STREET CONDOS HPR INC
501 FOLLY RD
CHARLESTON, SC 29412-3001

NFIP Policy Number: 1961516662

Agent/Agency #: 70001-01939-000

Reference #:

Phone #: (843)856-2909

NAIC Number: 10111

Processed by:

Flood Service Center

P.O. Box 8695 Kalispell MT 59904-8695

Property Location:

22 BEE ST
CHARLESTON, SC 29403-5881

Building Description:

2-4 Family
Two Floors
Elevated Without Enclosure
Low Rise
Main House
Not Provided

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: AE **Current Zone:** AE

Community Number: 45 5412 0512 J

Community Name: CHARLESTON, CITY OF

Grandfathered: No

Pre-Fire Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: 2

Elevated Building: Y

No Addition(s) and Extension(s)

Replacement Cost: \$763,000

Number of Units: 4

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	763,000	.350 / .080	1,250	13-	1,245.00	Premium Subtotal:	1,245.00
Contents:						Multiplier:	
Contents						ICC Premium:	6.00
Location:						CRS Discount:	250.00
						Reserve Fund Assmt:	150.00
						HFIAA Surcharge:	250.00
						Federal Policy Fee:	150.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						Total Premium Paid:	1,551.00

Coverage Limitations May Apply. See Your Policy Form for Details.

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:



FLOOD POLICY DECLARATIONS

ASSURANT® American Bankers Insurance Company of Florida
Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal

Policy Period: 05/13/2018 To 05/13/2019

Original New Business Effective Date: 05/13/2004

Reinstatement Date:

Form: RCBAP

For payment status, call: (800) 423-4403

These Declarations are effective

as of: 05/13/2018 at 12:01 AM

Producer Name and Mailing Address:
ATLANTIC SHIELD INSURANCE GROUP LLC
PO BOX 2496
MT PLEASANT, SC 29465-2496

Insured Name and Mailing Address:
BEE STREET CONDOS HPR INC
501 FOLLY RD
CHARLESTON, SC 29412-3001

NFIP Policy Number: 1961516661

Agent/Agency #: 70001-01939-000

Reference #:

Phone #: (843)856-2909

NAIC Number: 10111

Processed by:

Flood Service Center

P.O. Box 8695 Kalispell MT 59904-8695

Property Location:

24 BEE ST APT A
CHARLESTON, SC 29403-5838

Building Description:

2-4 Family
Two Floors
Elevated Without Enclosure
Low Rise
Main House
Not Provided

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: AE Current Zone: AE

Community Number: 45 5412 0512 J

Community Name: CHARLESTON, CITY OF

Grandfathered: No

Pre-Fire Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: 1

Elevated Building: Y

No Addition(s) and Extension(s)

Replacement Cost: \$858,900

Number of Units: 4

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	858,900	.570 / .680	1,250	19-	1,844.00	Premium Subtotal:	1,844.00
Contents:						Multiplier:	
Contents						JCC Premium:	6.00
Location:						CRS Discount:	370.00
						Reserve Fund Assmt:	222.00
						HFIAA Surcharge:	250.00
						Federal Policy Fee:	150.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						Total Premium Paid:	2,102.00

Coverage Limitations May Apply. See Your Policy Form for Details.

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:



Policy Number: 69615166632018

FLOOD POLICY DECLARATIONS

ASSURANT® American Bankers Insurance Company of Florida
Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal

Policy Period: 05/13/2018 To 05/13/2019

Original New Business Effective Date: 05/13/2004

Reinstatement Date:

Form: RCBAP

For payment status, call: (800) 423-4403

These Declarations are effective

as of: 05/13/2018 at 12:01 AM

Producer Name and Mailing Address:
ATLANTIC SHIELD INSURANCE GROUP LLC
PO BOX 2496
MT PLEASANT, SC 29465-2496

Insured Name and Mailing Address:
88E STREET CONDOS HPR INC
501 FOLLY RD
CHARLESTON, SC 29412-3001

NFIP Policy Number: 1961516663

Agent/Agency #: 70001-01939-000

Reference #:

Phone #: (843)856-2909

NAIC Number: 10111

Processed by:

Flood Service Center

P.O. Box 8695 Kalispell MT 59904-8695

Property Location:

24 BEE ST APT B
CHARLESTON, SC 29403-5838

Building Description:

Other Residential
Two Floors
Elevated Without Enclosure
Low Rise
Main House
Not Provided

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: AE Current Zone: AE

Community Number: 45 5412 0512 J

Community Name: CHARLESTON, CITY OF

Grandfathered: No

Pre-Fire Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: 0

Elevated Building: Y

No Addition(s) and Extension(s)

Replacement Cost: \$491,400

Number of Units: 5

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	491,400	1.430 / .690	1,250	22-	4,440.00	Premium Subtotal:	4,440.00
Contents:						Multiplier:	
Contents						ICC Premium:	6.00
Location:						CRS Discount:	889.00
						Reserve Fund Assmt:	534.00
						HFIAA Surcharge:	250.00
						Federal Policy Fee:	400.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						Total Premium Paid:	4,741.00

Coverage Limitations May Apply. See Your Policy Form for Details.

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:



FLOOD POLICY DECLARATIONS

ASSURANT® American Bankers Insurance Company of Florida
Scottsdale, AZ 85261-4337

Standard Policy Pre-FIRM Subsidized

Type: Renewal

Policy Period: 05/13/2018 To 05/13/2019

Original New Business Effective Date: 05/13/2004

Reinstatement Date:

Form: RCBAP

For payment status, call: (800) 423-4403

These Declarations are effective

as of: 05/13/2018 at 12:01 AM

Address Info

Producer Name and Mailing Address:

ATLANTIC SHIELD INSURANCE GROUP LLC
PO BOX 2496
MT PLEASANT, SC 29465-2496

Insured Name and Mailing Address:

BEE STREET CONDOS HPR INC
501 POLLY RD
CHARLESTON, SC 29412-3001

NFIP Policy Number: 1961516664

Agent/Agency #: 70001-01939-000

Reference #:

Phone #: (843)856-2909

NAIC Number: 10111

Processed by:

Flood Service Center

P.O. Box 8695 Kalispell MT 59904-8695

Property Info

Property Location:

24 BEE ST APT C
CHARLESTON, SC 29403-5838

Building Description:

2-4 Family
Two Floors
Slab On Grade
Low Rise
Main House
Not Provided

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: AE Current Zone: AE

Community Number: 45 5412 0512 J

Community Name: CHARLESTON, CITY OF

Grandfathered: No

Pre-Firm Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

No Addition(s) and Extension(s)

Replacement Cost: \$657,200

Number of Units: 4

Coverage & Rating

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	657,200	.940 / .950	2,000		6,136.00	Premium Subtotal:	6,136.00
Contents:						Multiplier:	
Contents						ICC Premium:	75.00
Location:						CRS Discount:	1,242.00
						Reserve Fund Assmt:	745.00
						HFIAA Surcharge:	250.00
						Federal Policy Fee:	150.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						Total Premium Paid:	6,114.00

Coverage Limitations May Apply. See Your Policy Form for Details.

Mortgage Info

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency: